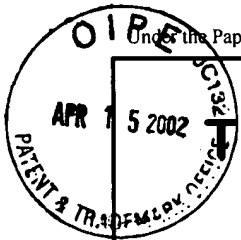


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(To be used for all correspondence after initial filing)

Application No.	09/560,215
Filing Date	April 28, 2000
First Named Inventor	Max Levchin
Group Art Unit	2164
Examiner Name	Vincent A. Millin
Attorney Docket No.	PAY00-001

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ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts Notice/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers for an application <input checked="" type="checkbox"/> Drawing(s) (1) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney by Assignee, with Revocation of Former Powers <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After-Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s): <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> PTO Form 2038 for \$ 774 <input checked="" type="checkbox"/> Letter to Official Draftsperson <input checked="" type="checkbox"/> Substitute Declaration
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Name	Daniel E. Vaughan (Registration No. 42,199)	Date	April 15, 2002
Signature		Telephone	650/474-1973
Address	702 Marshall Street, Suite 310, Redwood City, CA 94063	Facsimile	650/474-1976

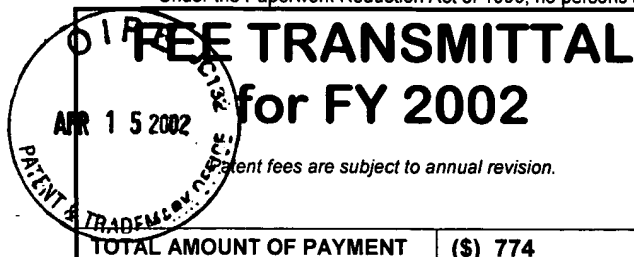
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METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																						
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:</p> <p>Deposit Account Number: 50-1801</p> <p>Account Name: Park, Vaughan & Fleming LLP</p> <p><input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Daniel E. Vaughan	Registration No. (Attorney/Agent)	42,199
Signature	<i>Daniel E. Vaughan</i>	Telephone	650-474-1973
		Date	April 15, 2002

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